



PATENTS
Attorney Docket No. HEH/002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Hilicki et al.
Application No. : 09/606,426 Confirmation No. : 6100
Filed : June 28, 2000
For : COIN DISPLAYING BOOK
Group Art Unit : 3722
Examiner : Mark T. Henderson

New York, New York 10020
May 3, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

EXPRESS MAIL CERTIFICATION

Sir:

"Express Mail" mailing label number: EV 619646870 US

Date of Deposit: May 3, 2005

I hereby certify that the papers and fees identified below are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed to the Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Transmittal Letter (in duplicate);
Reply To Office Action;
Supplemental Disclosure Statement;
Form PTO/SB/08A (in duplicate);
Two checks in the amount of \$950.00 and \$180.00; and
Postcard.

05-05-05

3722\$



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New York, NY 10020
May 3, 2005

TRANSMITTAL LETTER

Sir:

Transmitted herewith: [X] a Reply to Office Action;
and [X] a Supplemental Information Disclosure Statement; [X]
Form PTO/SB/08A (in duplicate); to be filed in the above-
identified patent application.

FEE FOR ADDITIONAL CLAIMS

[X] A fee for additional claims is not required.

[] A fee for additional claims is required.

05/06/2005 ZJUHR1 00000005 061075 09606426

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The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	60	-	68	* = 0	X \$200 =	\$ 0.00
INDEPENDENT CLAIMS	2	-	3	** = 0	X \$ 50 =	\$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$360 =	\$ 0.00
* If less than 20, insert 20.					TOTAL	<u>\$ 0.00</u>
** If less than 3, insert 3.						

[] A check in the amount of \$_____ in payment of the filing fee is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

[] Please charge \$_____ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

[X] A \$950.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a) is applicable to the Response filed herewith.

[] A check in the amount of _____ in payment of the extension fee is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted

herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

[X] Please charge the \$1,020.00 extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



Jeffrey D. Mullen

Reg. No. 52,056

Agent for Applicants

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